## Mission, Goals and Objectives

Mission: We aim to promote good health and help eliminate health disparities, reverse the epidemic of overweight/obesity, and over time reduce rates of diet-associated chronic diseases among California's 7 million FSNE-eligible parents and children. We do so by delivering a theory-based, consumer-driven and partner-friendly social marketing campaign that is well-networked and integrated with similar efforts throughout the state to increase the consumption of fruits and vegetables and physical activity as per the Dietary Guidelines for Americans. Achievement of these goals supports larger State purposes for higher educational attainment by children, increased work productivity in a global marketplace, control of excess health care costs, and a vigorous California agriculture.

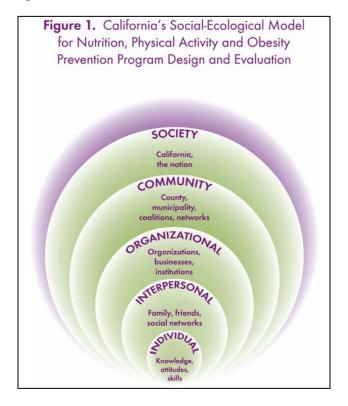
## Introduction to California's FSNE Work Plan

## 2. NEEDS ASSESSMENT APPLICATION

Based on your needs assessment and the current availability of other nutrition education services, describe and justify how you will reach Food Stamp Program eligibles and what priority areas your State will address through Food Stamp Nutrition Education. Note that all areas and strategies used to address identified issues must fall within the scope and focus of Food Stamp Nutrition Education. Indicate which issues you addressed in fiscal year 2005 and which ones you plan to address in fiscal year 2006.

California's state plan for FFY 2006 is based on the needs assessment described in Section A, ongoing experience, and evidence that FSNE interventions are working, together with a critical analysis of progress. In particular, changes in the 2005 Dietary Guidelines for Americans call for even more intense FSNE efforts, especially to increase fruit and vegetable consumption and physical activity as means of helping to slow or reverse obesity trends in low-income populations.

**Theory-based foundations:** We will continue to use the Social-Ecological Model as our scientific underpinning. Building on the FSNE white paper published in the *Journal of Nutrition Education* (Supplement, Sept. 2001, Gregson *et al*, pages S4-S15), we aim systematically to promote positive change for healthy eating and physical activity in five spheres of behavioral influence: individual, interpersonal, institutional/organizational, community, and social / policy / systems. For each sphere, multiple science-based theories are available to use in developing, implementing, and evaluating interventions. This approach is recommended by the Institute of Medicine's 2002 report, *The Future of the Public's Health in the 21st Century*, for achieving population behavior change.

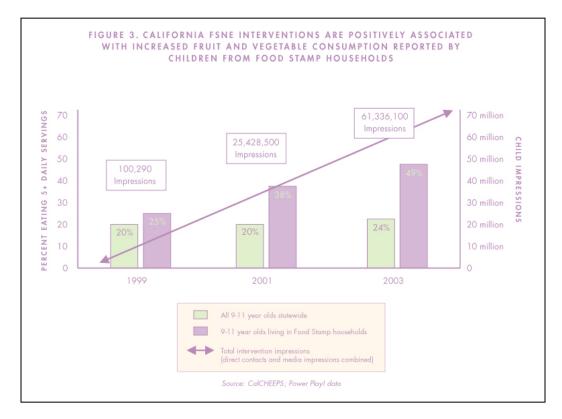


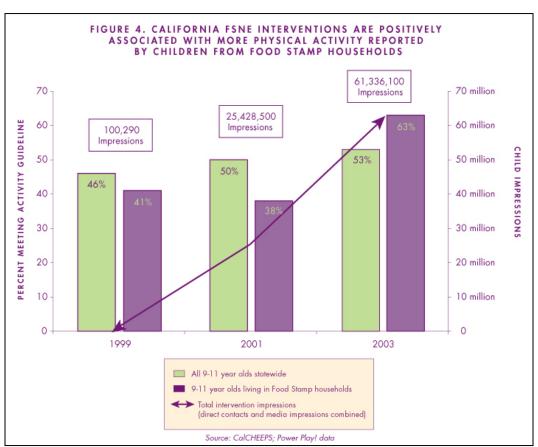
**Population-based approaches:** We will continue using both direct service and targeted, large-scale approaches to organize a set of integrated, complementary interventions that work together to facilitate healthier eating and physical activity practices by all FSNE-eligible parents and Children. We will reach them directly in service sites such as Food Stamp offices, shelters, food banks, and job training centers and in multiple community venues where they live, work, go to school, socialize, worship, buy food, and get physical activity.

How we organize our efforts: We will continue to vertically integrate our efforts to take advantage of any effective interventions available at the national level, capitalize at the state level on the assets of other State agencies and statewide organizations, coordinate across service delivery channels and the public, non-profit, and business sectors in 11 distinct regional media markets, and finally help local partners work together to deliver ever more comprehensive services.



**Priorities for low-income, Food Stamp eligible children:** The impressive changes seen both in fruit and vegetable consumption and in daily physical activity for 9-11 year old children from Food Stamp homes, compared to those from other low-income homes and from higher income families, suggest that the top-down/bottom-up approach is working. Children in this age group have been a comprehensive set of structured FSNE interventions delivered through the proveneffective *California 5 a Day-Power Play! Campaign*. Statewide roll-out of *Power Play!* to low-income children began with three regions in 1998, continued as new regions were added each year through 2001, and has been fully operational statewide through the 11 regions since then. It is complemented by other FSNE-interventions to parents and through schools that promote FV and PA. The following two charts display the behavioral trends reported by the children.

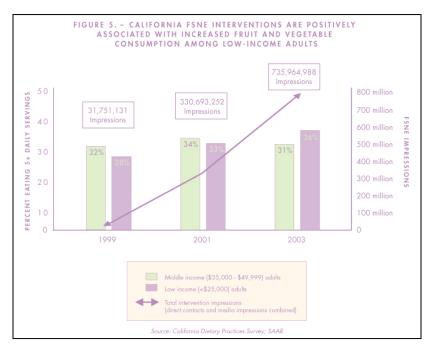




Behavioral changes by low-income children: As displayed in Figures 3 & 4, the survey analyses completed in 2005 show clear, statistically significant associations between reported behaviors and the dosage of FSNE intervention activity that was directed to elementary-aged children as FSNE efforts in school, community, and mass media channels grew between 1999 and 2003. Middle-income children showed no improvement, children from low-income homes not participating in Food Stamps showed some improvement (data not shown), and children from Food Stamp homes reported dramatic increases in both fruit and vegetable consumption and physical activity. This suggests that FSNE interventions are effective in reaching the very children to whom they were targeted. Thus, our FFY 2006 state plan will continue its heavy focus on interventions for children in school, community and mass media settings and work toward delivering similarly comprehensive social marketing interventions to other age and ethnic groups and integrate.

This focus will be intensified and expanded in multiple ways. Examples include: maintaining efforts with the UC-FSNEP youth programs; continually enhancing the proven-effective *Power Play! Campaign* with new fruit, vegetable and physical activity content; packaging and evaluating complementary school/community interventions such as *Harvest of the Month* which has evolved in *Network* schools as a popular and effective best practice; integrating nutrition into the nationwide *Safe Routes to School* movement as *Safe Routes to Healthy Food;* developing a FV module for school program planning; and providing leadership to promote a statewide *Farmto-School* system.

**Priorities for low-income, Food Stamp eligible adults:** For low-income adults as well, the evidence suggests that, as interventions have been taken to scale, population changes are starting to occur, although the effect is more modest than for children. In the FSNE-targeted adults, fruit and vegetable consumption increased slightly, while dropping in middle-income groups (see Figure 5 below); between 2001 and 2003, rates of physical activity also improved (data not shown).



These early data make it reasonable to speculate that California FSNE interventions could be buffering or possibly even reversing otherwise negative secular trends occurring in the U.S. where fruit and vegetable consumption rates are flat or dropping. The slightly higher intakes are being reported by California's lowest-income groups, in contrast to lower rates of consumption by the adult segments with more resources to buy food, and in spite of rising rates of food insecurity (data available only for 2001 to 2003). It seems fair to conclude that the positive results are reflecting the early combined effects for adults and children receiving FSNE across the state—education and marketing to low-income adults for which the regional infrastructure and roll-out was completed in 2005 together with education, marketing and school changes being received by their children. Therefore, our FFY 2006 State Plan stays the course with refinement of existing activities, it intensifies them by addressing more "upstream" barriers to healthy eating and physical activity in low-income communities, and aims to accelerate change even more by adding a new, stronger mass communications platform designed to create urgency for change.

New communications platform aims to create urgency for behavior change: Based on a comprehensive reassessment of external factors and formative testing with low-income parents completed in 2005, our new communications platform aims to cut through the clutter of messages in the marketplace, build on concern about obesity and related health problems that low-income and communities of color are experiencing first-hand, and tap into parental instincts that protect children from harm. This communications platform is:

With children as a catalyst for change, promote community changes that enable and inspire low-income mothers to intervene in family nutrition and physical activity practices.

For 2005 this strategy was implemented with an ad campaign entitled *Front Lines* in which authority figures – physicians and teachers – warned parents not to take childhood obesity lightly. For 2006, we are organizing for *Fed Up Moms*, a sequel in which low-income moms talk about what they are doing to reverse this crisis for their children; the range of options would be theoretically based and correspond with spheres of influence in the Social Ecological Model would be action-oriented and connect parents with FSNE resources as appropriate. This new platform is also intended to unify all FSNE efforts and accelerate change toward achieving the newly aggressive *2005 Dietary Guidelines for Americans* in the key areas of fruit and vegetable and physical activity promotion.

**Principal population <u>outcomes</u>:** We adapted a population-based approach that addresses social, community, ethnic, economic, and work/school-related determinants for low-income Californians from recommendations of the Institute of Medicine in its 2003 report, *The Future of Public Health in the 21<sup>st</sup> Century* (pages 46-95). Our statewide behavioral outcomes will continue to be that, in comparison to higher-income population segments, FSNE-eligible families and their children, will:

• Eat more fruits and vegetables: By 2005, the consumption of fruits and vegetables will increase by 0.15 servings in low-income adults and by 0.4 servings in 9-11 year old children from Food Stamp households, compared to 2003, and by 2006, consumption will increase by 0.4 servings in African American and Latino teens, compared to 2004;

- **Increase physical activity:** By 2005, rates of moderate and vigorous physical activity will increase in low-income adults by 10 percent<sup>1</sup> and by 12 percent in 9-11 year old children from Food Stamp households, compared to 2003, and by 2006, physical activity in African American and Latino teens will increase by 12 percent, compared to 2004;
- **Be more food secure:** In conjunction with our efforts to promote and increase access to Food Stamps (companion state plan for outreach), by 2006 participation in the Food Stamp Program will increase by 225,000 persons compared to 2003, and by 2005, rates of food security in adults <200% of FPL will return to 2001 levels; and
- Reduce overweight/obesity: By 2005, the rising rates of at-risk and overweight in low-income adults, teens and children will have slowed or flattened compared to previous levels.

While these changes will occur in 2005, measurement cannot be reported until 2006 for adults and children and 2006 for teens when results of biennial state surveys are reported.

**Data sources for measuring population <u>outcomes</u>:** Specific trends in the targeted low-income population, distinct from other population subgroups, are monitored biennially by representative statewide surveys. In odd-numbered years, these are the *California Dietary Practices Survey* of adults, the *California Children's Healthy Eating and Exercise Survey*, and the *California Health Interview Survey* (*CHIS*), and in even-numbered years, it is the *California Teen Eating, Exercise and Nutrition Survey*. All but the CHIS are unique in being developed solely to guide the planning, operation and evaluation of *Network* campaigns; they provide deep and rich information needed to fine-tune statewide campaigns.

Some measures can be monitored annually. Annual data sources include UC's *Food Behavior Checklist* for adults, the ERS (evaluation and reporting system) survey for youth, and the *Network Communications Benchmark Survey*. Other representative surveys exist, but they each include only a handful of relevant questions and therefore cannot provide a complete profile of progress. These include the *Behavioral Risk Factor Surveillance System*, the *California Women's Health Survey*, the *CHIS*, and the *California Fitnessgram*.

The Semi-Annual Activity Reports (SAAR) provide standardized information about the reach of the *Network's* social marketing activities, as well as qualitative achievements for all local and regional projects. In addition, each project is responsible for evaluation of its objectives, State staff work with local projects to identify population and community outcomes, and State and local partners work together to share best practices widely.

**Evaluation Challenges:** In accord with the 2006 FSNE Guidance, California's objectives are stated as occurring in FFY 2006. However, population outcomes accrue over a longer period and therefore require assessment of trends over multiple years. Triangulation using multiple data sets is the approach recommended by evaluation experts for health promotion programs in real world settings.<sup>2,3</sup> This non-experimental approach capitalizes on all available sources and types of data, helps identify other factors that advance or impede the desired results, and informs the

-

<sup>&</sup>lt;sup>1</sup> Percent estimate drawn from the sample of all California adults, not exclusively low-income adults.

<sup>&</sup>lt;sup>2</sup> Patton, M. Q., (2002). *Qualitative Research & Evaluation Methods* (3<sup>rd</sup> ed.) (pp. 555-563). Thousand Oaks, CA: Sage Publications, Inc.

<sup>&</sup>lt;sup>3</sup> Schneiderman, N., Speers, M. A., Silva, J. M., Tomes, H., & Gentry, J. H., (Eds.). (2001). *Integrating Behavioral and Social Sciences with Public Health*. (pp. 299-300). Washington, DC: American Psychological Association.

operation of interventions in real time. Thus, we will continue using the multiple state surveys for quantitative data, together with qualitative data from a variety of sources, some of which are described below.

It should be noted that the verification, review, compilation, and analysis of complex surveys generally requires 12-24 months, while comparison among multiple different data sets requires still more time, so the results of surveys often are not available for two or more years after initial planning. For the low-income children, teens and adults targeted by FSNE in California, in FFY 2006 we will be able to report findings from 2002 for teens and preliminary results from 2005 for adults and children. Results for FFY 2006 would be available in FFY 2007 and FFY 2008.

Intermediate goals: Population outcomes require that interventions of sufficient intensity be conducted over a number of years, they depend upon conditions being created that enable FSNE-eligible groups to act upon the education and promotional efforts we offer, and they will accrue through a combination of efforts from a wide variety of players, including but not limited to those funded by FSNE. Therefore, we have set intermediate goals that relate to our interventions and to the predisposing factors that influence behavior change in FSNE-eligible groups. This will allow us to assess progress by monitoring changes in all five spheres of influence covered by our theoretical model. These would include changes in organizational practices and policies, in environmental conditions to enable behavior change, and in systems that provide nutrition and physical activity-related services to low-income communities. The approach of addressing intermediate factors was recommended by the Institute of Medicine in its 2004 report, *Preventing Childhood Obesity –Health in the Balance* (page 4). Specific to our population outcomes and in conjunction with efforts by other partners, we aim to stimulate change for:

- **Fruits and vegetables:** By increasing consumer desire for and availability of fruits and vegetables through a variety of approaches in low-income communities, low-resource schools, and low-wage worksites;
- **Physical activity:** By increasing consumer desire for and opportunities for safe, pleasant physical activity through a variety of approaches in low-income communities, low-resource schools, and low-wage worksites;
- **Food security:** By strengthening the infrastructure for community food security systems through a variety of approaches, including those that promote and better link the Food Stamp Program with other nutrition education activities for lower-income households;
- Community mobilization: By empowering coalitions and mobilizing efforts toward institutional and environmental changes that promote energy balance in low-income communities, in low-resource schools, and low-wage worksites; and
- Environments that support healthy eating and physical activity: By increasing consumer awareness of and desire for conditions and policies that support healthy eating and physical activity in low-income communities, low-resource schools, and low-wage worksites.

**Data sources and indicators for measuring intermediate goals:** Measurement of intermediate goals will use a variety of indicators, many of which are already reported in the *Network's* Semi-Annual Activity Reports and planned for the new *Communities of Excellence in Nutrition*, *Physical Activity and Obesity Prevention*  $(CX^3)$  system that will be phased in by 2008. Examples of potential measures include:

- **Fruits and vegetables:** Growth in farmers' markets equipped for EBT; Food Stamp-certified stores that also participate in the *California 5 a Day Retail Program*; low-resource schools implementing school decisions to increase FV consumption; increased participation in *Harvest of the Month, Farm-to-School* purchasing, and the *Power Play! Campaign*; and low-wage worksites pilot testing and/or participating in the *5 a Day—Be Active! Worksite Program*.
- **Physical activity:** Increased availability and use of recreational facilities in low-income neighborhoods; number of low-resource schools participating in Walk to School initiatives; school decisions to increase PE or physical activity opportunities for students; increased use of Fitnessgram scores to drive improvements in school and neighborhood physical activity programs; and low-wage worksites pilot testing and/or participating in the 5 a Day—Be Active! Worksite Program.
- Food security: In conjunction with the Food Stamp Access Initiative, upgrades in connectivity between nutrition education and county Food Stamp programs signified by the use of the Food Stamp Office Kit; presence of an improved statewide toll-free call-in system for nutrition education and Food Stamp information; increased use of the 888-numbers; and consumer response reflected in rising rates of Food Stamp application in high-need counties.
- Community activation: In 2006 and 2007, we expect to build on the 2005 Front Lines media campaign with Fed Up Moms, a statewide effort to link concerned FSNE-eligible parents with available local resources for individual, interpersonal, institutional, and community action. Simple measures of response will include establishment of functional referral systems in each of the 11 Network media markets, consumer response to the special 888-number or website and, after that, consumer participation in local efforts.
- **Supportive environments:** In 2006 and 2007, we expect that the 11 Regional Collaboratives will begin to implement priorities through  $CX^3$  and achieve their locally-chosen community promotion objectives to maximize the effectiveness and delivery of FSNE interventions. At the community and State levels, an increasing number of practices and policies favorable to low-income communities to promote and enable fruit and vegetable consumption, physical activity, and food security will be adopted.

Existing and new educational materials: Our detailed workplan that describes FFY 2006 FSNE interventions provides specific information about materials that will be produced. In brief, we will continue to assist partners by making as many materials as possible available centrally. For children, we will continue to contract with the California Healthy Kids Resource Center to maintain a lending library of child and youth nutrition education materials. For adults, we will maintain existing warehouse services to fulfill orders from local projects for materials developed through FSNE in California. We have been monitoring the need for expanding the warehouse function to include technical assistance to partners in conducting their program planning, selecting materials, and – only when appropriate – developing/testing new materials. We will augment existing clearinghouse functions in accord with the findings of partner needs.

For new consumer educational materials, we will continue our practice at the State, regional and local levels of first identifying suitable materials such as those cited on the Food Stamp Nutrition Connection, the CSREES state FSNE website, and *National 5 A Day* websites. When no suitable materials are found, or when necessary to meet California's program and population needs, we then justify the development of new materials. For all contractors, we will continue to require

prior approval before they develop new educational materials and State review before production. We will work with the Western Regional Office to develop a practical protocol for approving such requests. In addition, new design guidelines will be used to create a uniform appearance for all FSNE educational materials in California.

In FFY 2006, we will continue to deplete available inventories of educational materials and nutrition education reinforcement items in order to revise them to adhere to the 2005 Dietary Guidelines for American. When they become available, we will replace the current 5 a Day logo and messaging with new national identifiers. We will continue the development and pilot testing of educational materials needed for delivering the 5 a Day—Be Active! Worksite Program and the Asian-American 5 a Day—Be Active! Campaign to our low-income audiences through gatekeepers in the selected channels.

**Key Result Areas:** Within the context of the *Network* and the *5 a Day Campaign*, social marketing is defined as a consumer-focused, comprehensive approach that employs the traditional business elements of advertising, public relations, promotion and personal sales (direct education) in combination with community development, consumer empowerment, partnership development, environmental and policy change, with use of the media advocacy to promote large-scale, sustainable behavior change. It is understood that FSNE may not be able to fund all necessary activities, so the scopes of work for all *Network* projects are required to include objectives aligned with the five spheres of influence in the Social Ecological Model. These would include working with other partners who can fill gaps and conduct activities not allowable by USDA.

The FSNE work plan that follows is organized around four complementary key result areas that UC, CDSS and CDHS cooperate to achieve. These functions support nearly 250 local projects, provide the coordination necessary to keep all the components working together, and integrate efforts to help realize the synergies that are necessary to secure statewide behavior change in low-income communities.

• Community interventions and development: This cluster of activities enables and supports FSNE-eligible families and children to consume more fruits and vegetables within a limited budget and engage in daily physical activity consistent with the 2005 Dietary Guidelines for Americans, and the complementary California Food Guide (in preparation). This is implemented in part by continuing our successful Local Incentive Award (LIA) program that qualifies State and local in-kind contributions for Federal Financial Participation reimbursement to provide more FSNE. The LIA program operates in 11 channels (Children and Families Commissions, City Governments, Colleges/Universities, County Offices of Education, Indian Tribal Organizations, Local Health Departments, Non Profits [pilot status], Park and Recreation Districts, School Districts, State Programs [CDE, California Conservation Corps, Preventive Healthcare for the Aging, California Project LEAN], the University of California's Cooperative Extension system), and California Healthy Cities and Communities.

Communities are supported through *competitive grants* for Food Security and African American faith projects, *regional infrastructure support* through 11 *Regional Nutrition Network* lead agencies, *statewide technical assistance* to all local contractors through site visits, trainings, statewide conferences, regular communications and distribution of

nutrition education reinforcement items, and *development of new intervention channels* such as after school, an Asian American 5 a Day pilot campaign, and a feasibility project with the county *First Five* commissions.

Within the *Network*, the *California 5 a Day Campaign* develops, implements, and evaluates multi-level, multi-component programs designed to increase daily fruit and vegetable consumption to recommended amounts, encourage daily physical activity levels for Food Stamp eligible adults and children, and promote the use of food assistance programs. The targeted FSNE programs that operate within the *California 5 a Day Campaign* include the *Children's 5 a Day—Power Play! Campaign, Latino 5 a Day Campaign, African American 5 a Day Campaign*, 5 a Day Retail Program, and 5 a Day Worksite Program.

The *Network's 5 a Day Campaigns* strive to facilitate lifestyle changes by reaching FSNE-eligible Californians directly through *multiple venues*, enabling organizations and communities to *promote environments* that increase access to quality, affordable fruits and vegetables and safe physical activity, and *inspiring organizational practices* that make 5 a Day and physical activity easy and socially supported choices. Each *Campaign* reaches a specific FSNE-eligible target audience and has been carefully *developed and tested* to ensure that the messages, dissemination channels, and methods are effective and appropriate for the target audience. The 5 a Day Campaign is promoted, implemented, and monitored at the regional level through 11 *Regional Nutrition Networks* who receive training, technical assistance, and resources from the state-level 5 a Day Campaign to ensure the successful implementation of the programs. The *Retail* and *Worksite Programs* (pilot) are designed to enhance these *Campaigns* by conducting channel-specific activities that partners can offer to multi-ethnic FSNE-eligible adults in qualified food stores and low-wage settings.

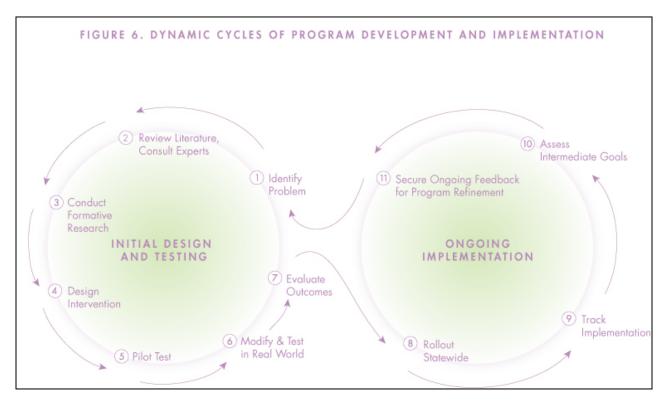
As noted throughout the Plan, we will continue to use the term 5 a Day and names of the special 5 a Day campaigns until the national re-branding and new messaging are completed, which is expected to occur by April 2006. At that time and as transitional procedures are finalized, we will work with partners to synchronize introduction of the re-branded campaign in California.

• Mass media and marketplace interventions: Broadcast and outdoor media are needed because FSNE target audiences are more heavily dependent on mass communications and commercial advertising to obtain information than are population segments with higher incomes or more education. FSNE-eligible Californians are very diverse group, California is very large, and the majority live outside FSNE-eligible census tracts, so a variety of mass media approaches must be used. We aim to *reach* as many of California's 7 million FSNE-eligible parents and children as possible through targeted broadcast and outdoor mass communications in order to build consumer awareness and support for achieving *Network* goals. We *help* local agency partners by raising public awareness and advancing *Network* objectives through public relations, also known as "earned media". We *complement* mass media and community nutrition education by providing ongoing educational reinforcement and cues to action for healthy fruit and vegetable purchases in Food Stamp-certified retail outlets. We accelerate change by offering *training* to help partners hone their social marketing skills and build on each others' success.

- **Program research and evaluation:** We *conduct* a variety of quantitative and qualitative activities that continuously advance the evidence base needed to design, implement, evaluate, and improve large-scale, multi-level, multi-channel, multi-component social marketing campaigns for FSNE-eligible audiences. The purposes are to *guide* and redirect statewide, regional, and local intervention efforts for maximum effectiveness, efficiency, and results and otherwise *increase* the return on investment by documenting and sharing what is learned as widely as possible.
- Leadership and infrastructure: To support partners and maximize the impact of the FSNE investment, we *provide* an administrative infrastructure that is driven to deliver superior support services and fiscal oversight to funders and local partners. This requires the *creation* of inclusive public/private planning and action mechanisms that *represent* the interests of all stakeholders, *raise awareness*, and *increase synergy* among anti-poverty nutrition practices and policies at all organizational levels. The *Network collaborates* extensively with other State agencies to maximize available resources and overcome barriers creatively. In specialized areas, we *sponsor* special projects that engage and enable other leadership organizations to join efforts and help achieve *FSNE* objectives.

Methods and strategies used to achieve population outcomes and intermediate goals: To operate California's large, diverse FSNE enterprise, an ongoing cycle of program development, continuous improvement, and responsiveness to new opportunities and learning is required. We have three approaches for selecting interventions.

First, as shown below, at the State level, we identify needs, develop and implement "branded" campaigns such as the *Children's Power Play! Campaign* or the *Latino 5 a Day Campaign*.



The cycle of steps is: (1) Identify the problem, (2) review the literature, (3) conduct formative research with consumers, key informants and prospective intermediaries, (4) design the intervention and develop materials, (5) pilot test in selected settings for consumer and intermediary response, (6) modify and conduct more rigorous testing in real-world settings, (7) evaluate consumer outcomes against experimental or comparative conditions, (8) revise materials and conduct training for large-scale roll-out, (9) use process measures to monitor implementation as per design, (10) evaluate for achievement of intermediate goals and population outcomes, and (11) continuously obtain consumer and intermediary feedback and use for routine program revision.

Second, we identify, test, package and disseminate promising practices developed by local and regional partners. *Harvest of the Month* is one example.

Last, we adapt proven-effective interventions that have been developed by others. Examples include *SPARK*, *Body & Soul*, packaging the Food Security Assessment to make it easier to use, adapting the national *Safe Routes to School* to add nutrition and branding it as *Safe Routes to Healthy Food*, and creating a FV module for *Network* schools that are interested in using the approach of CDC's *School Health Index* to plan their nutrition education programs.

The above objectives will be achieved in conjunction with other organizations where appropriate. Each project is outlined as per the requested template. For each Key Result Area the template details: (1) goals and objectives, (2) strategies, (3) Existing educational materials, (4) new educational materials, (5) performance measures, assigned staff, and budget amounts for FFY 2006, and (6) evaluation plans.

To save space in the work plan, codes are used for messages and topics (capital letters), key strategies (numbers), and channels (lower case letters). The Summary of Codes Table is located at the beginning of each section of the work plan (Key Result Areas 1-4). The work plan is color-coded to ease in review.

During the last quarter of FFY 2005 and the first two quarters of FFY 2006, contracts between CDHS and its contractors are executed and/or amended. In the course of the year, contractors also may work with the State and request approval to adjust activities as changing conditions warrant. For these reasons, specific activities may be adapted and introduced throughout the year in consultation with the Western Regional Office as appropriate.